



#10/BM
3-25-01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: CARLINO PANZERA ET AL)
SERIAL NUMBER: 09/460,951) Group Art Unit: 1731
FILED: December 14, 1999) Before the Examiner:
FOR: METHOD OF MANUFACTURE) Derrington, J.
OF DENTAL PORCELAIN)
HAVING SMALL LEUCITE)
CRYSTALLITES)

RESPONSE

Box Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

RECEIVED
MAR 23 2001
TC 1700

Sir:

This letter is submitted in response to the Office Action dated October 19, 2000 for which a Petition for a two-month extension of the time to respond to March 19, 2001, accompanies this Response.

United States Postal Service as first class mail in an envelope addressed to: Asst. Commissioner of Patents and Trademarks, Washington, D.C. 20231 on	
March 19, 2001 (Date of Deposit)	
Lisa M. Bracken (Name of Person Mailing Paper(s))	
Signature <i>Lisa M. Bracken</i>	Date 3/19/01

AMENDMENT TRANSMITTAL LETTER (Small Entity)Applicant(s): **Carlino Panzera, et al**

Docket No.

JEN-0005ZSerial No.
09/460,951Filing Date
12/14/99Examiner
Derrington, J.Group Art Unit
1731Invention: **METHOD OF MANUFACTURE OF DENTAL PORCELAIN HAVING SMALL LEUCITE CRYSTALLITES**

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.
- ☐ A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.

The fee has been calculated and is transmitted as shown below.

RECEIVED**TC 1700****CLAIMS AS AMENDED**

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	7 -	20 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$40.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☐ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of **\$195.00** to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **06-1130**
A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Dated: **3/19/2001**

Leah M. Reimer
Registration No. 39,341
Customer No. 23413

I certify that this document and fee is being deposited on 3/19/2001 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Signature of Person Mailing Correspondence

Lisa M. Bracken

Typed or Printed Name of Person Mailing Correspondence

cc: